## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	- 1		
FORMALITY REVIEW	- 7/	515	#/2/01
RESPONSE FORMALITY REVIEW			-1/7/

## INDEX OF CLAIMS

,	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim	Date	Claim	Date	Ctalm	Date
1 2.1			TÜTT		
Ersel Original	11111	Final		Final	
要をなる		E O		리	
		51		101	
21 2		52		102	
3 3 1 1		53		103	
4 4 1 1		54		104	
5 5		55		105	
6 (8)		56		106	
7 7		57		107	
9 (8) 7 9		58		108	
7 9		59		109	
10 10 1 1		60		110	
11 2100		61		111	
12		82		112	
13		63		113	
14		84		114	
15	$\Pi\Pi\Pi\Pi$	65	$\Box$	115	
18	$\Pi\Pi\Pi\Pi$	68	$\neg$	116	
17		67		117	<del>                                     </del>
18		68		118	
19		69		119	<del></del>
20	<del>                                      </del>	70	<del></del>	120	
21	<del>++++</del>	71	<del>+++++</del>	121	<del>                                     </del>
22	+++++	72	<del>               </del>	122	<del>                                     </del>
23	<del></del>	73	<del>++++</del>	123	<del>                                     </del>
24	++++	74	<del>+                                     </del>	124	<del>                                     </del>
25	<del>+++++</del>	75	<del>+++++</del>	125	<del>                                     </del>
28 .	<del>                                     </del>	76	<del></del>	126	+++++
27	+++++	77	<del>++++</del>	127	<del>                                     </del>
28	<del>+ + + + + + +</del>	78	++++	128	<del>1                                      </del>
29	<del>1            </del>	79	<del>+++++</del>	129	+++++++
30	+++++	80	+++++	130	+++++++
31	<del></del>	81	<del>+   -   -   -  </del> -   -   -   -   -   -	131	+++++
32	<del>1            </del>	82	++++	132	<del></del>
33	<del></del>	83	<del></del>		<del>                                      </del>
34	<del>                                      </del>	84	++++++	133	+++++++++
35	+++++	85	<del>                                     </del>	135	++++
36	+++++	86	+++++	136	+++++
37	++++	87	++++	137	+++++++
38	<del>                                      </del>	88	<del></del>		<del></del>
39	+++++	89	<del></del>	138	+++++
40	<del></del>	90	<del></del>	139	<del></del>
	++++		++++++	140	+++++++
41	+++++	91	11111	141	
42		92		142	
43		93		143	
44	$\Box$	94		144	
45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

If more than 150 claims or 10 actions

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V. 101

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